



Maine Health and Human Services

Maine Center for Disease Control
Maine Immunization Program

11 State House Station
Augusta, Maine 04333-0011

Paul R. Lepage, Governor
Mary Mahew, Commissioner

VACCINE TRANSFER FORM

Pin # _____ Provider Name _____ Date ____/____/____

Person Completing Form _____

Telephone Number _____ Fax Number _____

PLEASE COMPLETE ALL FIELDS

Place completed form in box with vaccines transferring

Transferred From Pin Number and Name of Facility	Transferred to PIN Number and Name of Facility	Name of Person that Accepted vaccine at facility receiving vaccine	Vaccine Brand Name	Manufacturer Name	Lot Number	Amount of Doses

Key Bank Plaza, 9th Floor
286 Water Street,
Augusta, Maine 04330

Phone (207) 287-3746
Fax: (207) 287-8127
Fax: 1-800-437-5743
TTY users call Maine Relay 711